Emotional Intelligence Among Surgical Nurses in Latvia

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Abstract

Personality dimensions - coping strategies, emotional intelligence, locus of control related with behaviour at work. This study focuses on the conceptualization of Bar-On which formulated emotional intelligence as a noncognitive intelligence which influences an individual's ability to cope effectively with environmental demands and pressures. The purpose of this paper was to study emotional intelligence among surgical nurses in Latvia. The study is using demographic data and Questionnaire of Emotional intelligence.

The highest average rates of emotional intelligence subscales are Emotional Self-Awareness, Social Responsibility and Interpersonal Relationship and leading competencies are Interpersonal and Intrapersonal.

Keywords:emotional intelligence, surgical nurses, emotional self-awareness, social responsibility, interpersonal relationship;

1. Introduction

Medicine is one of those branches where the issue of human resources is essential and important. The behaviour at work in general, and personality factors in particular, play a significant role in health care. Work behaviour characterizes such factors as job satisfaction, attainment of motivation, empathy, adequate behaviour in a given situation, ability to cooperate, work ethics respect, creative approach to work and others. Personality dimensions - coping strategies, emotional intelligence, locus of control related with behaviour at work (Фернхем & Хеивен, 2008).

Nurses need to interpret and understand how patients feel, to ascertain their motives and concerns, and demonstrate empathy in their care. They also need to understand and manage their own emotions, not just for high quality care, but for their own self-protection and health as well. Literature suggests that nurses with higher EI display strong self-awareness and high levels of interpersonal skills; they are empathetic and adaptable; are more likely to 'connect' easily with patients and to meet their emotional needs immediately; they are able to see the patients' perspectives and thus are more apt to understand and satisfy their needs (Kerfoot, 1996).

Scientists tend to view emotional intelligence as a factor which has a potential to contribute to more positive attitudes, behaviours and outcomes. The idea of emotional intelligence goes back to early studies in 1920s (Bar-On & Parker, 2000). In the 1980, scholars began to systematically conceptualize the idea of emotional intelligence. There are very important Gardners concept of intrapersonal intelligence and interpersonal intelligence (Gardner, 1983). Salovey and Mayer first termed emotional intelligence as "the subset of social intelligence that involves the ability to monitor ones, own and other feelings and emotions, to discriminate among then and to use this information to guide ones thinking and actions" (Mayer & Salovey, 1997). Later on, they refined and defined emotional intelligence as "the ability to perceive emotions, to access and generate emotions so as to assist thoughts, to understand emotions and emotional knowledge, and to reflectively regulate emotions so as to promote emotional and intellectual growth" (Mayer & Salovey, 1990). Individuals who accurately appraise and express (perceive and

respond to) their emotions are likely to be better understood by the people they work with, and they also have the potential to better lead and manage people around them and to develop empathy – the ability to comprehend another feelings and to re-experience them oneself (Santesso, Reker, Schmidt, Segalowitz, 2006). Emotional intelligence with its abilities, e.g., empathy, control of emotions, can play important role in regulation of aggressive impulses and in formation of effective interpersonal relations. This is confirmed by the results of research about connection between low emotional intelligence indicators and high rates of aggression (Santesso, Reker, Schmidt, Segalowitz, 2006). This aspect is health care is very important. Based on Bar-Ons previous work, view emotional intelligence as a noncognitive intelligence which is influence an individual ability to cope effectively with environmental demands and pressures (Bar-On & Parker 2000; Bar-On, Brown, Kirkcaldy, Thome, 2000; Bar-On, 1999). This study focuses on the conceptualization suggested by Bar-On. On the Bar-On base of emotional intelligence model is worked out one of the first emotional intelligence questionnaire which is widely used in different researches (Austin, Saklofske, Egan, 2005; Day, Therrien, Carroll S, 2005; De Raad , 2005; Maree & Eiselen R, 2004).

2. Method

The aim of this paper was to study emotional intelligence among surgical nurses in Latvia. The population was 104 surgical nurses from different hospitals in Latvia. The study is using such tools as obtaining demographic data and Questionnaire of Emotional intelligence (EQi of Bar-On, 1996). This tool was adapted by A.Gaitniece-Putane in 2008 (Gaitniece-Putane, 2008).

In this study, emotional intelligence was measured with self-report measure of emotional intelligence developed by Bar-On for several reasons: First, this measure gives data about five scales of Emotional intelligence. This scales are Intrapersonal scale, Interpersonal scale, Stress Management scale, Adaptability scale and General Mood scale. Second, each of this scales consist of some subscales, which gives us extra information about components of Emotional intelligence. Intrapersonal scale was estimated by following subscales: Self- Regard, Emotional Self-Awareness, Assertiveness, Independence and Self-Actualization. Interpersonal scale was based on the Empathy subscale, Social Responsibility and Interpersonal Relationship scales. Stress Management scale included Stress Tolerance and Impulse control subscales. Adaptability scale characterized by Reality- Testing, Flexibility and Problem Solving scales. General Mood scale was based on the Optimism and Happiness scales.

3. Results

Demographic analysis of 104 nurses – respondents: 83% of them are 31 -50 years old. All of them have work experience in surgical profile patient nursing more than five years. 59% of respondents have length of service in profession 21-30 years and 77% of them have secondary vocational education, 22% higher education.

Emotional intelligence indicator average interval is from 3.0 – 3.7 points (max5), (Figure1). The highest average rates have Emotional Self-Awareness (3.7 points), Social Responsibility (3.5 points), Interpersonal Relationship (3.6 points). The Empathy subscale (3.31 points) is in the middle position. Six following subscales: Self- Regard, Assertiveness, Self-Actualization, Problem Solving, Optimism and Happiness scales have results alike (3.25 points). Three subscales: Independence (3.0 points), Stress Tolerance (3.06 points) and Reality- Testing (3.06 points) subscales have the lowest points. The largest group of respondents (50%) have a total emotional intelligence average interval 3.5-3.7 points, 38% of respondents have 3.3-3.4 points and 12% of respondents have 3.0-3.2 points. All the emotional intelligence competencies average rates range from 3.12 for stress management till 3.4 for interpersonal competence (Figure 2).
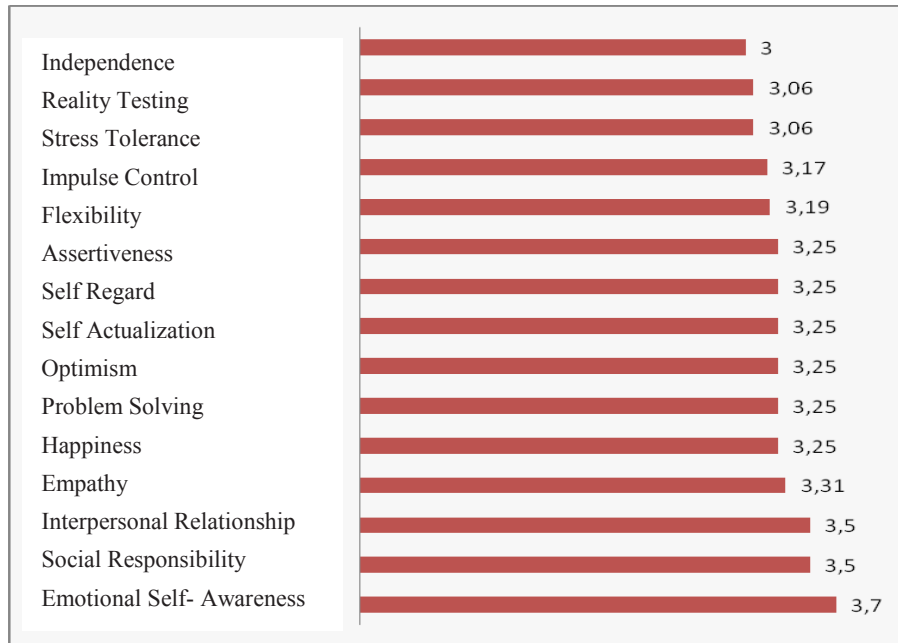
Independence	3
Reality Testing	3,06
Stress Tolerance	3,06
Impulse Control	3,17
Flexibility	3,19
Assertiveness	3,25
Self Regard	3,25
Self Actualization	3,25
Optimism	3,25
Problem Solving	3,25
Happiness	3,25
Empathy	3,31
Interpersonal Relationship	3,5
Social Responsibility	3,5
Emotional Self- Awareness	3,7

Figure 1. Average scores (max5) of Emotional intelligence subscales by Bar- On EQ -i

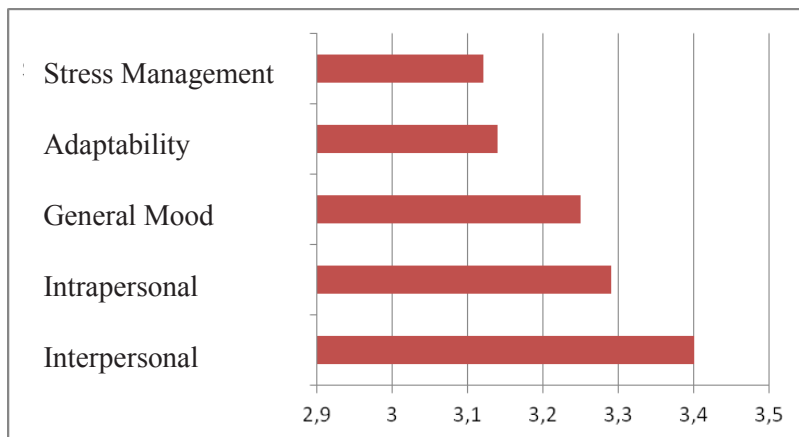|	
Stress Management	
Adaptability	
General Mood	
Intrapersonal	
Interpersonal	

2,9 3 3,1 3,2 3,3 3,4 3,5

Figure 2. Average scores (max5)of Emotional intelligence scales by Bar-On EQ-i

4. Discussion

Analyzing each emotional intelligence scale questionnaire, it is visible, that the average values are different, but the range is not extensive. In general, all figures are above the average (max 5), which might show that all 15 subscale describing competences are characterizing the sample of respondents.

The lowest obtained rate has the independence subscale (3 points), but the highest average rate (3.7 points), the self awareness subscale. The highest average scores have Empathy, Social Responsibility, Interpersonal Relationship, Emotional Self-awareness subscales. Comparing these results with a study performed in Netherlands among mental health nurses, we can see similar results.

The highest rates are found with the self – awareness subscale and that shows that surgical nurses pay attention to their emotions, they are able to recognize and understand them.

The result obtained could be due the fact that all nurses working have a surgery profile which very often is associated with the unpredictable, complex and acute situations, where the importance of team work is more essential then individual work. The second highest rate has the subscale of social responsibility and the subscale of interpersonal relationship (3.5 points). This means that in surgery nurses can show themselves as an active and team member. They are willing to act in the interest of the team and the following of the rules adapted by the society are very important for them.

Similarly, they are able to establish and maintain mutually satisfactory relationships with other people. The lowest rates are obtained with the independence subscale (3 points), stress tolerance and credibility subscales (3.06 points). These figures indicate that there is a relatively low capacity to cope with adverse situations and situations with a lot of pressure. This result could also be associated with age of respondents and the length of working in surgery, where situations with a lot of pressure is a part of the job. Having too much pressure shows also that there is a relatively low ability to be realistic and work effectively in problematic situations, when it is necessary to use your abilities, skills and competence to take appropriate decisions to solve (address) the situation in assessing the emotional intelligence competence indicators, the highest rates are noted to the interpersonal competence (3.4 points), which indicates that respondents are more characterized with following capabilities: the ability to establish and maintain mutually satisfied and close relationships (empathy and interpersonal relationships); ability to show yourself as on social group member (social responsibility).

However, all the competencies indicator averages are relatively high – above 3.12 (max5) which shows that the entire range of competencies is typical of the study sample.
The study respondents are characterized by the fact that they have a good ability to recognize their feelings and feel positive with their work, which are indicated by average indicator of intrapersonal competence (3.29 points). Less pronounced are the adaptation (3.14 points) and stress – management (3.12 points) competencies, which indicates that the sample has less representative abilities ability to control their emotions (impulse control); ability to assess the differences between what are internal subjective experiences and the fact that there is on objective, external (credibility) and stress tolerance.

While analyzing the total average value of emotional intelligence has shown that is ranges from 3.0 to 3.7 points, at which the majority of respondents (88%) values are 3.0 to 3.7 range. Summary random emotional intelligence in the joint value of the indicator is relatively high – above the average.

5. Conclusion

The last two years there is economical crisis in Latvia that provoked different structural reforms in heath care. Therefore in this situation there are difficulties for patients to receive qualitative healthcare. The professional relevant behaviour of nurses becomes more significant and emotional intelligence is one of the factors which characterize relationships between nurse and patient.

This study shows that the leading Emotional intelligence competences are Interpersonal and Intrapersonal. Interpersonal competence involve Social Responsibility and Interpersonal Relationship, but Intrapersonal competence most involving Emotional Self-Awareness, because this subscale have highest average rates.

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